|  |         |   | ORD  | ER FOR   | SUPP                   | LIES O   | R SERV                    | VICE                 | cs                                 |                                |                   |                        | Form App           | roved                                   | -                         | Page 1 Of 4                                  |  |
|--|---------|---|--|--|------------------------|--|---------------------------|----------------------|------------------------------------|--------------------------------|-------------------|------------------------|--------------------|---|---------------------------|--|--|
| 1. Contract/Purch Order No. 2. Delivery Order No.  |         |   |  |  |                        | 3. Date Of Order                                     |                           |                      | 4. Requisition/Purch Request No.   |                                |                   |                        | st No.             | 5. Certified for National Defense Under |                           |  |  |
| DAAE20-01-D-0012   |         |   |  | 0001   |                        |  |                           | 2000DEC26            |                                    |                                | S                 | SEE SCHEDULE           |                    |   | DMS Reg 1 Priority DOA5   |  |  |
| 6. Issued By   |         |   |  |  |                        | 7. Administered By (                                 |                           |                      | ner than 6) Code                   |                                |                   | s s s                  | 310A               | 8. Delivery FOB                         |                           |  |  |
| TACOM-ROCK ISLAND  AMSTA-LC-CTT  JEFF DEVILDER (309)782-6329  ROCK ISLAND IL 61299-7630                    |         |   |  |  |                        | DCMC NEW YORK FT WADSWORTH BLDG 120 207 NEW YORK AVE |                           |                      |                                    |                                |                   |                        |                    | X Dest Other                            |                           |  |  |
|  |         |   |  |  |                        | STATEN ISLAND NY 10305-5013                          |                           |                      |                                    | -5013                          |                   |                        |                    | Other                                   |                           |  |  |
| EMA  | AIT: DE | VILDERU                                       | @RIA.ARI                                       | MY.MIL   |                        |  | SCI                       | SCD C PAS NONE       |                                    |                                |                   |                        | ADP I              | T SC1                                   | .012                      | (See Schedule if other)                      |  |
| 9. Contractor  DRESSER ARGUS INC 36 BRIDGE ST  |         |   |  | Code   | Code 84583 Facility Co |  |                           |                      | ode 10. Deliver To FO  SEE SCHEDUI |                                |                   |                        | DB Point By (Date) |   |                           | 11. Mark If Business Is    X   Small   Small |  |
| BROOKLYN NY 11201-1115   |         |   |  |  |                        |  |                           |                      | -                                  | 12. Discount Terms Net 30 Days |                   |                        |                    |   | Disadvantaged Woman-Owned |  |  |
| TYPE BU  | SINESS  | : Other                                       | Small E  | Business P   | erform                 | ing in U   | .s.                       |                      |                                    | 13. Mai                        | l Invo            | ices To                | See Blo            | ck 15                                   | ;                         |  |  |
| 14. Shi  | p To    | אווו פי                                       |  | (  | Code                   |  | _ ~                       |                      | Will Be N                          |                                |                   |                        | Code               | SC                                      | 1016                      | Mark All                                     |  |
| 351  | SCHEL   | ODE   |  |  |                        |  | I                         | OFAS-                | CO-JNB/B                           | UNKER H                        |                   |                        |                    |   |                           | Packages And<br>Papers With                  |  |
|  |         |   |  |  |                        |  |                           |                      | BOX 1820<br>BUS OH                 |                                | 077               |                        |                    |   |                           | Contract Or<br>Order Number                  |  |
|  |         |   |  |  |                        |  |                           | Darme:               | nt will                            | he made                        | by F              | leatr                  | onic Fund          | c Tra                                   | ngfer                     | Order Number                                 |  |
| 16.  |         | х   | This do  | elivery orde   | r is issu              | ed on ano  |                           |                      |                                    |                                |                   |                        |                    |   |                           | nd conditions of                             |  |
| T O<br>Y R   | Delive  | ry 📗 🗴  | above  | above numbered contract.   |                        |  |                           |                      |                                    |                                |                   |                        |                    |   |                           |  |  |
| P D  |         |   | Reference your Oral; Written Quotation , Dated |  |                        |  |                           |                      |                                    |                                |                   |                        |                    |   |                           |  |  |
| E E<br>R<br>O  | Purch   | ase   | Accept   | sh the following on terms specified herein.  otance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order cously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And |                        |  |                           |                      |                                    |                                | •                 |                        |                    |   |                           |  |  |
| F  |         |   |  | m The Same   |                        | 19 140W W  | iouiiieu, s               | subjec               | tt IU All (                        | or the r                       | CI IIIS Z         | Anu C                  | onurrons 5         | et Poi                                  | ın, Anu                   | Agrees 10                                    |  |
|  | Nam     | ne Of Cor                                     | ntractor                                       |  |                        | Signa  | fure                      |                      |                                    | Type                           | d Nan             | ne And                 | Title              | -                                       |                           | Date Signed                                  |  |
| ☐ If   |         |   |  | ier must sig   | n Accer                | Ü  |                           | he foll              | lowing nu                          | • •                            |                   |                        |                    |   |                           | - ···· ~-g                                   |  |
|  |         |   |  | OPRIATIO   |                        |  | TICE                      |                      | CHEDULE                            |                                | соргоз            |                        |                    |   |                           |  |  |
| 18. Iter   | n No.   | 19. Schedule Of Supplies/Service SEE SCHEDULE |  |  |                        |  | 20. Quantity<br>Ordered   |                      | <b>d</b> /                         |                                | it 22. Unit Price |                        | 23.                | 23. Amount                              |                           |  |  |
|  |         |   | CT TYPE:<br>-Fixed-P                           |  |                        |  | A                         | ccept                | ed*                                |                                |                   |                        |                    |   |                           |  |  |
|  |         |   | F CONTRA<br>ly Contr                           | CT:<br>acts and 1  | Priced                 | Orders   |                           |                      |                                    |                                |                   |                        |                    |   |                           |  |  |
| * If quantity accepted by the Government 24. United States   |         |   |  |  |                        | es Of America  |                           |                      |                                    |                                |                   |                        | . Total            | \$115,375.00                            |                           |  |  |
| is sameas quantity ordered, indicate by X.  If different, enter actual quantity accepted  By: HOWARD LEWIS |         |   |  |  |                        |  | Contracting/Ord           |                      |                                    | /Ordei                         | U                 |                        | Differ-            | -                                       |                           |  |  |
| below quantity ordered and encircle.  LEWISH@RIA.ARMY.MIL ( 26. Quantity In Column 20 Has Been             |         |   |  |  |                        |  |                           | (309)782<br>27. Ship |                                    | 28. 1                          | D.O. V            | oucher No.             | 30.                | ences<br>. Initials                     | <u> </u>                  |  |  |
|  |         |   |  |  |                        |  |                           |                      | 1                                  |                                |                   |                        |                    |   |                           |  |  |
| Inspected Received Accepted And Conforms To Contract Except As Noted                                       |         |   |  |  |                        |  | Partial Final 31. Payment |                      |                                    | Paid B                         | 33. Amour         |                        | . Amoun            | t Verified Correct For                  |                           |  |  |
| Date Signature Of Authorized Govt Representative   |         |   |  |  |                        |  |                           |                      |                                    |                                |                   | 34. Check Number       |                    | Number                                  |                           |  |  |
| 36. I certify this account is correct and proper for payment   |         |   |  |  |                        |  |                           |                      | Complete                           |                                |                   |                        |                    |   |                           |  |  |
|  |         |   |  |  |                        |  | Parti                     |                      |                                    | •                              |                   |                        | 35.                | 35. Bill Of Lading No.                  |                           |  |  |
|  |         |   |  |  |                        |  |                           | Final                |                                    |                                |                   |                        |                    |   |                           |  |  |
| 27 D.  | Date    | 4   |  | Signature And Title Of Certifying 38. Received By 39. Date 1   |                        |  |                           |                      | 40 Tota                            | otal Contain                   |                   | ners 41. S/R Account N |                    | • No                                    | No. 42. S/R Voucher No.   |  |  |
| 37. Received At  |         |   | 38. Ke   | eceived By 39. Date R  |                        | eceived  |                           | -v. Total Coffia     |                                    | neis   41. §                   |                   | 5/K ACCOUNT NO         | ı 1 <b>NO</b> .    | 42. 5/1                                 | x voucher No.             |  |  |

## **CONTINUATION SHEET**

## Reference No. of Document Being Continued

PIIN/SIIN DAAE20-01-D-0012/0001

MOD/AMD

Page 2 of 4

Name of Offeror or Contractor: DRESSER ARGUS INC

SUPPLEMENTAL INFORMATION

- 1. This Delivery Order 0001 is issued for 355 each, Manual Firing Device, NSN: 1025-00-997-2431.
- 2. This Delivery Order is the first buy during pricing period #1 (Award of Contract 30 Sept 2001), and as the quantity of 355 each for this order is within the quantity range of 300 399 units, the unit price for this order is \$325.00, or for a total dollar value of \$115,375.00.

\*\*\* END OF NARRATIVE A 001 \*\*\*

**CONTINUATION SHEET** 

## Reference No. of Document Being Continued PIIN/SIIN DAAE20-01-D-0012/0001 MOD/AMD

Page 3 of 4

Name of Offeror or Contractor: DRESSER ARGUS INC

| ITEM NO | SUPPLIES/SERVICES   | QUANTITY | UNIT | UNIT PRICE  | AMOUNT       |
|---------|---|----------|------|-------------|--------------|
|         | SUPPLIES OR SERVICES AND PRICES/COSTS   |          |      |             |              |
| 0001    | Supplies or Services and Prices/Costs   |          |      |             |              |
| 0001AA  | PRODUCTION QUANTITY   | 355      | EA   | \$325.00000 | \$115,375.00 |
|         | NSN: 1025-00-997-2431 NOUN: FIRING DEVICE, MANUAL FSCM: 19207 PART NR: 11599606 SECURITY CLASS: Unclassified PRON: M101A107M1 PRON AMD: 03 ACRN: AA AMS CD: 070011JHLBJ   |          |      |             |              |
|         | Packaging and Marking  Inspection and Acceptance  |          |      |             |              |
|         | Deliveries or Performance  DOC SUPPL  REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD  001 W52H090172H600 W25G1U J 2  DEL REL CD QUANTITY DEL DATE  001 100 30-MAY-2001  002 100 30-JUN-2001  003 100 30-JUL-2001  004 55 30-AUG-2001  FOB POINT: Destination  SHIP TO: PARCEL POST ADDRESS (W25G1U) XU TRANSPORTATION OFFICER  DDSP NEW CUMBERLAND FACILITY  BUILDING MISSION DOOR 113 134  NEW CUMBERLAND PA 17070-5001  CONTRACT/DELIVERY ORDER NUMBER  DAAE20-01-D-0012/0001 |          |      |             |              |
|         |   |          |      |             |              |
|         |   |          |      |             |              |
|         |   |          |      |             |              |

| CONTINUATION CHEET                               | Reference No. of Document Bein  | Page 4 of 4                         |                   |
|--|---------------------------------|-------------------------------------|-------------------|
| CONTINUATION SHEET                               | PIIN/SIIN DAAE20-01-D-0012/0001 | MOD/AMD                             |                   |
| Name of Offeror or Contractor: DRESSER AR        |                                 |                                     |                   |
| CONTRACT ADMINISTRATION DATA                     |                                 |                                     |                   |
| LINE PRON/ OBLG ITEM AMS CD ACRN STAT ACCOUNTING | CLASSIFICATION                  | JOB ORDER ACCOUNTING NUMBER STATION | OBLIGATED AMOUNT  |
| 0001AA M101A107M1 AA 2 97 X4930A<br>070011JHLBJ  | C6G 6D 26FB S11116              | W52H09 \$                           | 115,375.00        |
|  |                                 | TOTAL \$                            | 115,375.00        |
|  | CLASSIFICATION                  | ACCOUNTING<br>STATION               | OBLIGATED  AMOUNT |
| Army AA 97 X4930A                                | C6G 6D 26FB S11116              | W52H09 \$ _                         | 115,375.00        |

TOTAL \$ 115,375.00